

RECEIVED

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

MAR 18 2008 *aw*
MAR 13 2008
MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

ARNOLD JOYNER

(Enter above the full name
of the plaintiff or plaintiffs in
this action)

08CV1513
JUDGE CONLON
MAGISTRATE JUDGE BROWN

vs.

Case No: _____
(To be supplied by the Clerk of this Court)

ROGER WALKER

TERRY McCANN

DEE BUTTAGLIA

DONALD HULZCH

JASON GARNETT

BRIAN FAIRCHILD

(Enter above the full name of ALL
defendants in this action. Do not
use "et al.")

CHECK ONE ONLY:

☒

COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983
U.S. Code (state, county, or municipal defendants)

☐

COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE
28 SECTION 1331 U.S. Code (federal defendants)

☐

OTHER (cite statute, if known)

**BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

I. Plaintiff(s):

- A. Name: ARNOLD JOYNER
- B. List all aliases: NONE
- C. Prisoner identification number: N31385
- D. Place of present confinement: STATEVILLE C.C.
- E. Address: P.O. Box 112 Joliet, IL 60434

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

- A. Defendant: ROGER WALKER
 Title: DIRECTOR
 Place of Employment: Springfield, IL. I.D.O.C.
- B. Defendant: TERRY MCCANN
 Title: WARDEN
 Place of Employment: STATEVILLE C.C.
- C. Defendant: DEE BUTTAGALZA
 Title: FORMER WARDEN
 Place of Employment: STATEVILLE C.C.

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

Additional Defendants

D. Defendant

Title

Pl. of Empl.

Donald HutzleWardenMenard C.C.

E. Defendant

Title

Pl. of Empl.

Jason GarnettAssistance DirectorSpringfield, IL, IDOC

F. Defendant

Title

Pl. of Empl.

Brian FairchildAdms. Review BoardOffice of Inmates IssuesSpringfield, IL, IDOC

III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:

- A. Name of case and docket number: NONE
- B. Approximate date of filing lawsuit: NONE
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: NONE
- D. List all defendants: NONE
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): NONE
- F. Name of judge to whom case was assigned: NONE
- G. Basic claim made: NONE
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): NONE
- I. Approximate date of disposition: NONE

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

IN JAN. + FEB. 06, I WAS CHARGED AND TRIED FOR ATT.
ESCAPE + ESCAPE. THE COOK COUNTY D.O.C. SUSPENDED
ALL MY PRIVILEGES, MADE ME A INDETERMINATE SEG STATUS
INMATE THE REMAINDER OF MY COUNTY STAY, AND THE
COURT SENTENCE ME TO A TOTAL OF 12 YRS. IN MARCH 06
THE NEW DIRECTOR THAT WAS THE FORMER DIRECTOR OF
ASST./ASSOCIATE TO THE IN. DEPT. OF CORR. DIRECTOR ROGER
WALKER, TOLD ME I WOULD PAY FOR THE ESCAPE IN MORE
WAYS THAN ONE.

ON MAY 23RD 2006, I WAS SENTENCE TO THE I.D.O.C., 2 HRS
LATER I WAS TAKEN TO STATEVILLE C.C. N.R.C. WHERE YOU
SO SECURITY STAFF ESCORTED ME FROM THE SHERIFFS CAR TO
THE N.R.C. SEG UNIT. THERE I WAS STRIPPED + SEARCHED AND
CUSSED AT + THREATENED ABOUT THE ESCAPE CASE. I WAS GIVEN
A GREEN JUMPSUIT + GREEN Z.D. WHICH MADE ME A LEVEL
E SPECIAL OFFENDER. I HADN'T BROKEN ANY RULES, YET WALKER
BUTTAGLIA APPROVED THIS ACTION + ON MAY 25TH 2006 I WAS
SENT TO MENARD C.C.. WHILE AT MENARD I TRIED TO GET

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

SOME ANSWERS. My Counselor N. Schumaz told me I basically had nothing coming because I was LEVEL 2, and that LEVEL 2 was out of his hands. He told me to write to Special Offender Lt. Cannon + I did, but he never responded. I wrote to warden Hulick and his two assistant wardens explaining my situation they never responded. On July 7, 2006 I filed a grievance regarding Menard C.C. staff conduct toward me and discrimination for not allowing me to take part in the I.D.D.C. rehabilitation program. On 8-11-06 N. Schumaz answered stating LEVEL 2 was ineligible for jobs (work/school). On 8-21-06 grievance officer Tyone Murray receive said grievance but didn't address grievance for 10 months before denying it because I was no longer at Menard C.C. LEVEL 2 require yearly transfers + in May 07 my year was up. However 6 months after not hearing on the 7-8-06 issue, I filed another grievance on 2-22-07 for

STAFF CONDUCT A CONSTITUTIONAL RIGHTS VIOLATIONS OF ILLINOIS - Art. 1 - Sect. 2, 10, 11, 17 + 20. THIS TIME N. SCHWARTZ GAVE A DIFFERENT RESPONSES AND I SENT IT TO GRIEVANCE OFFICER. IN JUNE 07 I RECEIVE BOTH GRIEVANCE BACK AND I APPEALED TO SPRINGFIELD I.DOC. ADMIN. REVIEW BOARD WHERE BRIAN FAIRCHILD OF INMATES ISSUES DENIED THE 7-8-06 ISSUES AND NEVER ADDRESS THE 2-22-07 ISSUES AFTER HE SENT TO ME TO PROVIDE HIM VERIFICATION THE GRIEVANCE OFFICER IN MENARD ALSO REFUSED THE ISSUE - I did.

IN APRIL 07 I SPOKE WITH DIR. JASON CORNETT IN MENARD'S EAST CELL HOUSE REGARDING LEVEL E, PREFERRED TREATMENT BY STAFF + EXCESSIVE PUNISHMENT, HE BRUSH ME OFF, SAYING MY ESCAPE CHARGE GIVES THEM JUSTIFICATION TO KEEP ME LEVEL E. NOW THAT I'M BACK IN STATEVILLE C.C. I SUFFER THE SAME CIRCUMSTANCES, NO ASSIGNMENT (work/school) NO drug treatment, CONTACT VISITS OR REHABILITATION. I'VE WRITTEN DIR. ROGER WALKER, WARREN T. MCCANN, ALW WRIGHT, SPECIAL OFFENDER LT. EILBERSON - NONE HAS RESPONDED. (SEE ATTACHED EXHIBITS)

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I want to be removed from the Special Offenders
Level 2 program immediately. I want the staff to
pay me \$500,000 dollars and split my court cost between
them. I want the court to transfer me to the Fed.
system so the state staff doesn't retaliate on me.
I want all my rights + privileges restored back.

VI. The plaintiff demands that the case be tried by a jury. ☒ YES ☐ NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 29 day of Feb., 2008

Arnold Joyner
 (Signature of plaintiff or plaintiffs)

Arnold Joyner
 (Print name)

N31385
 (I.D. Number)

P.O. Box 112
Joliet, IL.

60434
 (Address)

| | | | |
|--|-----|--------------------------------------|-----------|
| Illinois Department of Corrections | | ADMINISTRATIVE DIRECTIVES | |
| | | Number | 05.05.110 |
| | | Page | 1 of 6 |
| | | Effective | 8/15/2000 |
| Section | 05 | Operations | |
| Subsection | 05 | Classification | |
| Subject | 110 | Escape Risk Designations | |

I. POLICY**A. Authority**

730 ILCS 5/3-2-2

B. Policy Statement

Each person committed to the Adult or Juvenile Division shall be assigned an escape risk level. Inmates or youth who have a history of escapes or runaways, attempted escapes or runaways, or escape-related behavior may warrant increased security measures. Such inmates or youth shall be identified and supervised according to the assigned escape risk level.

II. PROCEDURE*** A. Purpose**

The purpose of this directive is to establish guidelines for assigning an escape risk level to an inmate or youth.

B. Applicability

This directive is applicable to all facilities within the Adult and Juvenile Divisions of the Bureau of Operations.

C. Internal Audits

An internal audit of this directive shall be conducted at least annually.

*** D. Delegates**

Individuals specified in this directive may delegate stated responsibilities to another person or persons unless otherwise directed.

*** E. General Provisions**

1. Nothing in the provisions herein shall be construed to limit the authority of the Director to house or transfer an inmate or youth in any institution, facility, or program.

EXHIBIT**A-1**

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|-------------------------------------|-------------------------------|-----------------------|----------------------------|
| ADMINISTRATIVE DIRECTIVE | Effective 8/15/2000 | Page 2 of 6 | Number 05.05.110 |
|-------------------------------------|-------------------------------|-----------------------|----------------------------|

2. Time frames established herein shall represent the minimum length of time an inmate or youth shall remain in the escape risk level designated or in a higher escape risk level or a combination thereof.
3. Escape risk levels required herein shall represent the minimum level in which an inmate or youth shall be placed.

Requirements

1. During the classification process at a Reception and Classification Center, an inmate or youth shall be assigned one of the following escape risk levels in accordance with the guidelines established in this directive (See Paragraph II.G.).
 - a. Level E - extremely high escape risk.
 - b. Level H - high escape risk.
 - c. Level M - moderate escape risk.
 - d. Level L - low or no apparent escape risk.
2. Upon transfer to a facility and during each inmate's annual reclassification or during each quarterly reclassification of a youth, the inmate's or youth's escape risk designation shall be reviewed to determine if it is still appropriate.
 - a. If the review is for reclassification, the Security Reclassification/Escape Risk Report shall be completed in its entirety.
 - b. If the review is only to determine the escape risk level, only the escape risk level section of the Security Reclassification/Escape Risk Report shall be completed.
 - c. All escape risk levels shall be reviewed by the Chief Administrative Officer and documented in the Chief Administrative Officer's action section of the Security Reclassification/Escape Risk Report.
3. An inmate's or youth's assigned escape risk level may be changed at any time it is determined that he or she no longer represents the assigned level.
 - a. An inmate who escapes from a Level One through Level Seven adult facility shall be designated a Level E escape risk and shall remain in Level E status for a minimum of five years.
 - b. An inmate who escapes from a Level Eight adult facility shall be designated a minimum of Level H escape risk and shall remain in a minimum of Level H status for at least 9 months.

Illinois Department of Corrections

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- * c. Adult parole absconders shall be designated no less than a Level M escape risk and shall remain in a minimum of Level M status for at least one year.
- d. Prior approval of the Deputy Commander of Operations shall be required to:
- (1) Remove any inmate or youth from a Level E escape risk status; or
 - (2) Reduce an escape risk level by more than one level at a time.
4. Escape risk information shall be entered into the Offender Tracking System (OTS) for adults and into the Juvenile Tracking System (JTS) for juveniles using the "escape risk-flag" data element.
5. A card with the phrase "ESCAPE RISK" and the letter designation "E", "H", or "M" stamped in red bold letters shall be stapled on the face sheet of the master file of each inmate or youth designated as a Level E, Level H, or a Level M escape risk.
6. Once an escape risk level is determined, whether at the Reception and Classification Center or at the receiving facility, the inmate or youth shall be issued a color-coded identification card to denote the escape risk level assigned. If necessary, a new identification card shall be issued at the time of transfer or following review of escape risk level. Identification cards shall be issued in accordance with Administrative Directive 01.07.806.
7. Inmates and youth shall be identified and monitored and inmate or youth assignments shall be made based on escape risk designations in accordance with Administrative Directive 05.03.105.

X G. Guidelines

- * 1. The intent of the escape risk determination is to be able to readily identify those inmates or youth whose past history and behavior coupled with knowledge and observation of their current behavior place them at an extremely high, high, or a moderate escape risk level.
2. Items listed below as well as the requirements in Paragraph II.F.3. shall be considered in assigning an escape risk level. For an inmate or youth to be assigned a specific level, one or more of these conditions shall be present. The presence of a condition, however, does not require the assignment of that level. The presence of a condition shall effectively contribute to the determination of an escape risk level. Staff shall be selective in labeling an inmate or youth as an extremely high, high, or a moderate escape risk.
- a. Level E (Extremely High) - an inmate or youth who poses an extremely serious escape risk due to:

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|-----------------------------|-----------|--------|-----------|
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- * (1) A history of: escape from a Level One through Level Seven adult facility within the past five years; escape or runaway or attempted escape or runaway from any closed confinement with or without any actual or threat of violence or an escape or runaway or attempted escape or runaway while under security escort (for example, court writ, medical or funeral furlough, transfer, etc.) within the past five years;
- (2) An indicated desire or willingness to escape or runaway by:
self-admission; preparing for, discussing, or documenting preparations for an escape or runaway; or possession of escape paraphernalia;
- * (3) Behavior;
- (4) An outstanding immigration warrant or warrant(s) for major criminal charges;
- (5) Remaining time to serve and type of sentence (for example, life, natural life, death, multiple consecutive sentences, etc.); or
- * (6) Other appropriate considerations.

* **NOTE:** An extremely high escape risk shall normally be housed only at Level One or Level Two adult security facilities or Level One juvenile security facilities. Assignments shall be within the inner perimeter area and work and program assignments shall be during daylight hours. Adult work assignments shall be restricted to the hours of 8:00 a.m. to 2:00 p.m. The inmate's or youth's daily activities shall be closely monitored in accordance with Administrative Directive 05.03.105.

b. Level H (High) - an inmate or youth who poses a serious escape risk due to:

- (1) A history of: escape from a Level One through Level Seven adult facility; escape from a Level Eight adult facility within the last nine months; escape or runaway or attempted escape or runaway from a closed confinement with or without any actual or threat of violence; or an escape or runaway or attempted escape or runaway while under security escort (for example, court writ, medical or funeral furlough, transfer, etc.) within the past five years;
- (2) An indicated desire or willingness to escape or runaway by
self-admission or by preparing for or discussing preparations for an escape or runaway;
- (3) An outstanding immigration warrant or warrant(s) for major criminal charges;

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NOTE: A Level I Inmate or youth may be housed at any Department facility regardless of the facility's security level.

Authorized by:


Donald N. Snyder Jr.
Director

Supersedes:

05.05.110

AD

7/1/2000

A-5

ILLINOIS DEPARTMENT OF CORRECTIONS
COMMITTED PERSON'S GRIEVANCE

| | | |
|---|--|--|
| Date: <u>7-8-2006</u> | Committed Person: (Please Print) <u>ARNOLD JAMES</u> | ID#: <u>N 31385</u> |
| Present Facility: <u>Menard CC</u> | Facility where grievance issue occurred: <u>Menard CC</u> | |
| NATURE OF GRIEVANCE: | | |
| <input type="checkbox"/> Personal Property | <input type="checkbox"/> Mail Handling | <input type="checkbox"/> Restoration of Good Time |
| <input checked="" type="checkbox"/> Staff Conduct | <input type="checkbox"/> Dietary | <input type="checkbox"/> Medical Treatment |
| <input type="checkbox"/> Transfer Denial by Facility | <input type="checkbox"/> Transfer Denial by Transfer Coordinator | <input checked="" type="checkbox"/> Other (specify): <u>Discrimination</u> |
| <input type="checkbox"/> Disciplinary Report: _____ | Date of Report: _____ | Facility where issued: _____ |
| Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification. | | |
| Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to: Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board, Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor. Chief Administrative Officer, only if EMERGENCY grievance. Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer. | | |
| Brief Summary of Grievance: <u>I am a inmate of Menard CC and I am</u> <u>under a status considered Level E inmate state law</u> <u>requires all inmates of the state of Illinois within</u> <u>the Dept of Corr. be rehabilitated with some kind</u> <u>of skill or skills whereas one can go back out to</u> <u>society and become a productive citizen. Under the</u> <u>Menard CC present system this is impossible to do</u> <u>1st They refuse to give me an assignment or allow</u> <u>me to attend school my counselor stated to me its</u> <u>because I am Level E 2nd I am in a grade</u> <u>and I need a job at school or move me to another</u> <u>facility which offers a rehabilitation system.</u> | | |
| Relief Requested: <u>I want to be rehabilitated under state</u> <u>law. I need a job at school or move me to another</u> <u>facility which offers a rehabilitation system.</u> | | |
| <input type="checkbox"/> Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self. | | |
| Committed Person's Signature: <u>Arnold James</u> | | Date: <u>7-8-2006</u> |

(Continue on reverse side if necessary)

| | |
|--|---|
| Counselor's Response (If applicable) | |
| Date Received: <u>8/11/06</u> | <input type="checkbox"/> Send directly to Grievance Officer |
| GRIEVANCE OFFICE ADMINISTRATIVE REVIEW CENTER Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277 | |
| Response: <u>Level E inmates are not eligible for a job in the ECH. Just because</u> <u>of his ex-high ERD, he is not denied for education but it would</u> <u>prohibit a move to the school galleries. Inmate was last reviewed for</u> <u>his ERD status on 5/26/06 & will be reviewed at least on an</u> <u>annual basis.</u> | |
| Print Counselor's Name: <u>N. Schwartz</u> | Date of Response: <u>8/14/06</u> |

| | |
|---|---|
| EMERGENCY REVIEW | |
| Date Received: _____ | Is this determined to be of an emergency nature? |
| | <input type="checkbox"/> Yes; expedite emergency grievance |
| | <input type="checkbox"/> No; an emergency is not substantiated. Committed person should submit this grievance in the normal manner. |
| Chief Administrative Officer's Signature: _____ | Date: _____ |

but ARE being provided when I haven't broken any
 Rules of A.D. 504, 304. There are inmates in the
 South Cell house that's not in grade but have all the
 benefits the institution gives out such as jobs, school
 extra yard & gym. If state law requires all inmates
 to be rehabilitated then Menard C.C. must comply as
 every other facility within the state. For instance
 in maximum C.C. & minimum C.C. all inmates have
 jobs or either attends some form of schooling. I
 am an inmate just as they are. I understand this
 is a maximum security facility, however, all other
 maximum security facilities within the U.S.A. has
 jobs & schooling for inmates according to the law and
 Menard C.C. is no different under the law. Even
 federal maximum facilities has jobs or schooling for
 the inmates within their facility. If Menard C.C. isn't
 required to rehabilitate their inmates then I want
 to see and read their protocol so I can understand
 and be familiar with its agenda whereas I will not
 violate any said rules or regulations. The Menard
 C.C. handbook I was given shortly stated its
 purpose was to rehabilitate:

A. J. Jerney

N.B. 385
 C.C.

ILLINOIS DEPARTMENT OF CORRECTIONS
RESPONSE TO OFFENDER'S GRIEVANCE

2

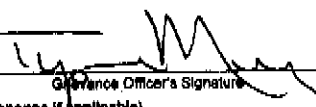
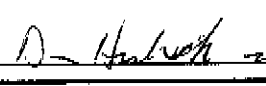
| Grievance Officer's Report | | |
|--|--|---|
| Date Received: <u>August 21, 2006</u> | Date of Review: <u>June 1, 2007</u> | Grievance # (optional): <u>104-8-06</u> |
| Offender: <u>Arnold Joyner</u> | ID#: <u>N31385</u> | |
| Nature of Grievance: <u>Staff Conduct</u> | | |
| <p>Facts Reviewed: <i>Inmate is grieving that he is a level E inmate and Menard refuses to allow him to attend school. Inmate is requesting to be rehabilitated under state law. He wants a job or school or moved to another facility.</i></p> <p><i>OTS indicates inmate was transferred to Stateville Correctional Center on 5/21/07.</i></p> | | |
| <p>Recommendation: <i>Grievance has no Merit. Inmate is no longer at Menard and has been transferred.</i></p> | | |
| Tyone Murray Print Grievance Officer's Name | |  Grievance Officer's Signature |
| (Attach a copy of Offender's Grievance, including counselor's response if applicable) | | |
| Chief Administrative Officer's Response | | |
| Date Received: <u>June 1, 2007</u> | <input checked="" type="checkbox"/> I concur | <input type="checkbox"/> I do not concur <input type="checkbox"/> Remand |
| Comments: | | |
|  Chief Administrative Officer's Signature | | <u>6/1/07</u> Date |
| Offender's Appeal To The Director | | |
| <p>I am appealing the Chief Administrative Officer's decision to the Director. I understand this appeal must be submitted within 30 days after the date of the Chief Administrative Officer's decision to the Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277. (Attach a complete copy of the original grievance, including the counselor's response, if applicable, and any pertinent documents.)</p> | | |
| Offender's Signature | ID# | Date |

Exhibit
B
3

| ILLINOIS DEPARTMENT OF CORRECTIONS OFFENDER'S GRIEVANCE | | |
|---|---|-----------------------|
| Date: <u>2-22-2007</u> | Offender: (Please Print) <u>Arnold, Jay</u> | ID#: <u>N-31385</u> |
| Present Facility: <u>MENARD C.C.</u> | Facility where grievance issue occurred: <u>MENARD C.C.</u> | |
| NATURE OF GRIEVANCE: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Personal Property</div> <div style="width: 33%;"><input type="checkbox"/> Mail Handling</div> <div style="width: 33%;"><input type="checkbox"/> Restoration of Good Time</div> <div style="width: 33%;"><input type="checkbox"/> Disability</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Staff Conduct</div> <div style="width: 33%;"><input type="checkbox"/> Dietary</div> <div style="width: 33%;"><input type="checkbox"/> Medical Treatment</div> <div style="width: 33%;"><input type="checkbox"/> HIPAA</div> <div style="width: 33%;"><input type="checkbox"/> Transfer Denial by Facility</div> <div style="width: 33%;"><input type="checkbox"/> Transfer Denial by Transfer Coordinator</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Other (specify): <u>Violating of Constitutional Rights</u></div> </div> <div style="display: flex; margin-top: 5px;"> <div style="width: 50%;"><input type="checkbox"/> Disciplinary Report: _____ Date of Report: _____</div> <div style="width: 50%;"><input type="checkbox"/> Facility where issued: _____</div> </div> | | |
| <p>Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification</p> <p>Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to: Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board. Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor. Chief Administrative Officer, only if EMERGENCY grievance. Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.</p> | | |
| <p>Brief Summary of Grievance: <u>I am grieved the Administration treatment within MENARD C.C. they are violating my Constitutional Rights as expressed by the U.S. Constitution. Article I, Bill of Rights Section 8 II Limitations of Penalties After Conviction - All penalties shall be determined both according to the seriousness of the offense and with the objective of restoring the offender to useful citizenship. MENARD is a maximum security facility. All its inmates are escorted by security personnel only. There is never free movement throughout the facility in which a inmate is not escorted. I have been deemed what called Level 2 inmate which carries a high</u></p> <p>Relief Requested: <u>I want a job in the institutions industry, or anywhere else I can prove my worthiness. I want to be removed from level 2 status, and placed in a facility that obeys the laws that there said to obey future.</u></p> <p><input type="checkbox"/> Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.</p> | | |
| <u>Arnold, Jay</u> Offender's Signature | | <u>N-31385</u> ID# |
| <u>2 / 22 / 2007</u> Date | | |

(Continue on reverse side if necessary)

| Counselor's Response (if applicable) | |
|--|--|
| Date Received: <u>2 / 26 / 07</u> | <input type="checkbox"/> Send directly to Grievance Officer <input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277 |
| <p>Response: <u>Inmate current aggression level is 9-moderate, requiring him to cell in the ECH. The only jobs available in the ECH are janitor workers, of which inmates must be low or moderate escape risk. Inmate will be reviewed at least on an annual basis for his escape risk designation.</u></p> | |
| <u>N. Schwartz</u> Print Counselor's Name | <u>N. Schwartz</u> Counselor's Signature |
| <u>2 / 28 / 07</u> Date of Response | |

| EMERGENCY REVIEW | |
|---|---|
| Date Received: _____ | <p>Is this determined to be of an emergency nature?</p> <div style="display: flex;"> <div style="width: 50%;"><input type="checkbox"/> Yes; expedite emergency grievance</div> <div style="width: 50%;"><input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner</div> </div> |
| <p>_____ Chief Administrative Officer's Signature</p> | |
| <p>_____ Date</p> | |

Security Classification, I as well as any other inmate within this facility are NEVER without security personnel, be that I am in the cell house or not. However, I am being punished extra for being a Level 2 inmate. The facility refuses to give me a job, any school or vocational training which violates Art. I- Sect. 11. The Manual and Book Statement of purpose - pg. 1 states All offenders shall be afforded the opportunity to explore and participate in programs designed to assist them towards a successful reintegration in society and reduce the negative effects of incarceration. The Level 2 directive also states Level 2 inmates can be assigned details, yet the Administration has only kept me as 23-1 hour lockdown each day but good sleep. I have never broken any rules at Menard in which disciplinary action was given to lose any of the privileges offered the inmate population which leads to my sentence. Art. I- Sect. 17 Discrimination in Employment, due to being a Level 2 inmate. All persons shall have the right to be free from discrimination on the basis of race, color, creed, national ancestry and sex in hiring and promotional practices of any employer. Menard employs inmates with jobs, schooling and vocational training as part of their reintegration back to society for useful citizenship, and I being a model productive inmate should be afforded these same rights other inmates that going back and never going back to society are afforded which leads to my sentence. Art. I- Sect. 20 Individual Dignity - To promote individual dignity, communications that portray criminal depravity or lack of virtue in or that incite violence, hatred, abuse or hostility toward a person or group of persons by reason of or by reference to religious, racial, ethnic, national or regional affiliation are condemned. From the treatment of this Administration it makes me feel my quality of life is not as important or significant as the other inmates which are given the opportunities to prove themselves worthy. I feel degraded which keeps my virtue at question. I am trying to conform to their standards of morality & excellence but I'm not afforded the chance. This Administration has deem me within the affiliation of Level 2 inmates which leaves me condemned by their own standards. I have written to the warden concerning a job at schooling. My counselor has refused these same request. Had am I to be rehabilitated if I am left to rot within the cell 23 hours a day everything I'm asking for falls within the security enactment of this prison daily program. All I want is equal treatment under the law. No other inmate at Menard is better than me, and this Administration shouldn't be allowed to give out preferential treatment especially since it's not apart of their rules & regulations. For instance most skilled jobs are held by the white inmates but majority of the population is black inmates and that's the same as for security aggressive levels assigned here at Menard C.C.

Blaine's Security is high, written and told A. Thompson

Illinois
Department of
Corrections

Rod R. Blagojevich
Governor

ROGER E. WALKER
Director

Menard Correctional Center / P.O. Box 711 / Menard, IL 62259-9998 / Telephone: (618) 826-5071 / TDD: (800) 52

MEMORANDUM

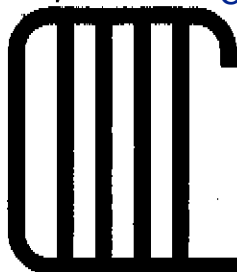
DATE: April 17, 2007

TO: Joyner, A N31385 E-5-08

FROM: Major Richard D. Moore
Menard Correctional Center

SUBJECT: Recent Letter

In regard to the recent letter concerning grievances, I have forwarded the letter to the Grievance Officer to address.



Illinois
Department of
Corrections

Rod R. Blagojevich
Governor

Roger E. Walker Jr.
Director

1301 Concordia Court / P.O. Box 19277 / Springfield IL 62794-9277 / Telephone: (217) 558-2200 / TDD: (800) 526-0844

November 7, 2007

Arnold Joyner
Register No. N31385
Stateville Correctional Center

Dear Mr. Joyner:

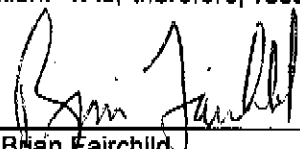
This is in response to your grievance received on July 2, 2007, regarding classification (Level E status at Menard), which was alleged to have occurred at Menard Correctional Center. This office has determined the issue will be addressed without a formal hearing.

In your letter explaining two grievances you allege to have filed at Menard CC prior to transfer to Stateville CC remain unanswered. You claim you were denied a job at Menard based on your Level E status in an unconstitutional manner in the first grievance. In your second grievance, you allege that you were forced to pay for a new ID inappropriately. This office has contacted Menard CC Grievance Office in regard to your allegations. It is noted there is no record of the grievance regarding the ID being forwarded to the Grievance Officer. It is also noted the grievance in regard to your allegations of unconstitutional imprisonment was received in the Grievance Office and addressed prior to your transfer in Grievance Officer's Report 104-8-06. The grievance regarding the ID will not be addressed as there is no record of it being timely filed.

In regard to your allegation that unidentified Menard CC staff have discriminated against you by not allowing you to hold a job or engage in other programming aimed at your rehabilitation, it is noted you were assigned as a Chaplaincy Department Participant at your request on November 28, 2006, and remained a participant until your transfer to Stateville on May 23, 2007. It is further noted you were disciplined for Insolence at Menard CC on May 14, 2007, for statements made to a female nurse. You were transferred to Stateville CC subsequent to that discipline due to your familiarity with the staff and Institution. It is also noted you are currently an unassigned utility man at Stateville CC pending appropriate placement.

Based on a total review of all available information, it is the opinion of this office that the issue was appropriately addressed by the institutional administration. It is, therefore, recommended the grievance be denied.

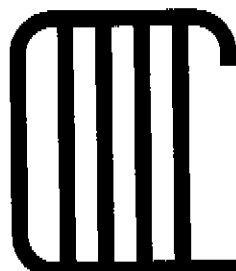
FOR THE BOARD:


Brian Fairchild
Administrative Review Board
Office of Inmate Issues

CONCURRED:


Roger E. Walker Jr.
Director

cc: Warden Terry McCann, Stateville Correctional Center
Arnold Joyner, Register No. N31385



Illinois
Department of
Corrections

Rod R. Blagojevich
Governor

Roger E. Walker Jr.
Director

Menard Correctional Center / 711 Kaskaskia Street / Menard, IL 62259 / Telephone: (618) 826-5071 / TDD: (800) 526-0844

February 13, 2008

Mr. Arnold Joyner, N31385
Stateville Correctional Center
16830 South Route 63
Crest Hill, IL 60403

RE: Request For Level E Status Change

Mr. Joyner:

Your letter dated 1/9/08 addressed to Deputy Director Fewes has been forwarded to my office for handling.

Due to the fact you are currently housed at Stateville Correctional Center, our staff was unable to review your master file as to the nature of the escape/dangerous weapon charge. The information I was able to obtain indicates that you were placed on the Level E status on the same day you were admitted to NRC on 5/23/06, not when admitted to Menard Correctional Center on 5/25/06.

I will forward a copy of this letter along with your letter to the counseling staff at Stateville Correctional Center. Additionally, you should contact your counselor at Stateville in writing to request a review of your Level E status for consideration.

Sincerely,

A handwritten signature in black ink, appearing to read 'Donald A. Hulick'.

Donald A. Hulick
Warden
Menard Correctional Center

cc: Stateville Correctional Center - Clinical Services
Master File
File

20 ILLINOIS ADMINISTRATIVE CODE CH. I SEC. 504
SUBCHAPTER e

SUBPART A: ADMINISTRATION OF DISCIPLINE

Section 504.10 Applicability

This Subpart applies to adult and juvenile offenders within the Department of Corrections.

(Source: Amended at 27 Ill. Reg. 6214, effective May 1, 2003)

Section 504.12 Definitions

"Chief Administrative Officer" means the highest ranking official of a correctional facility.

"Department" means the Department of Corrections.

"Director" means the Director of the Department of Corrections.

"Offender" means a person committed to the Department or to the custody of the Department.

(Source: Amended at 27 Ill. Reg. 6214, effective May 1, 2003)

Section 504.15 Responsibilities

- a) Unless otherwise specified, the Director or Chief Administrative Officer may delegate responsibilities stated in this Subpart to another person or persons or designate another person or persons to perform the duties specified.
- b) No other individual may routinely perform duties whenever a Section in this Subpart specifically states the Director or Chief Administrative Officer shall personally perform the duties. However, the Director or Chief Administrative Officer may designate another person or persons to perform the duties during periods of his or her temporary absence or in an emergency.

(Source: Amended at 22 Ill. Reg. 1206, effective January 1, 1998)

Section 504.20 Offenses and Maximum Penalties

Disciplinary offenses are defined in Appendix A. Maximum penalties for conduct that constitutes a disciplinary offense are set forth in Table A for adult offenders and in Table B for juvenile offenders.

- a) No offender shall be found guilty of any violation of these rules without a hearing before the Adjustment Committee or Program Unit. If an offender is transferred

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SUBCHAPTER e

SUBPART F: GRIEVANCE PROCEDURES FOR OFFENDERS

| Section | |
|----------------|--|
| 504.800 | Applicability |
| 504.802 | Definitions |
| 504.805 | Responsibilities |
| 504.810 | Filing of Grievances |
| 504.820 | Grievance Officer |
| 504.830 | Grievance Procedures |
| 504.840 | Emergency Procedures |
| 504.850 | Appeals |
| 504.860 | Records |
| 504.870 | Direct Review by Administrative Review Board |

SUBPART G: GRIEVANCE PROCEDURES FOR RELEASEES

| Section | |
|----------------|----------------------|
| 504.900 | Applicability |
| 504.905 | Definitions |
| 504.910 | Responsibilities |
| 504.920 | Filing of Grievances |
| 504.930 | Review of Grievances |
| 504.940 | Appeals |

APPENDIX A Offense Numbers and Definitions

| | |
|----------------|--|
| TABLE A | Maximum Penalties for Adult Offenders |
| TABLE B | Maximum Penalties for Juvenile Offenders |
| TABLE C | Offenses and Maximum Penalties -- Community Services Division (Repealed) |

AUTHORITY: Implementing the Americans With Disabilities Act of 1990 (42 USC 12101 et seq.) and implementing and authorized by Sections 3-2-2, 3-5-2, 3-6-3, 3-8-7, 3-8-8, 3-10-8, and 3-10-9 of the Unified Code of Corrections [730 ILCS 5/3-2-2, 3-5-2, 3-6-3, 3-8-7, 3-8-8, 3-10-8, and 3-10-9]. Sections 504.70 and 504.450 are implementing a Consent Decree (U.S. Department of Justice vs. the State of Illinois, #S-CIV-76-0158, S.D. Ill., 1978). Sections 504.80 and 504.460 are also implementing a Consent Order (Arsberry vs. Sielaff, #74 C 1918 and Longstreet vs. Sielaff, #74 C 1951, N.D. Ill., 1982).

SOURCE: Adopted at 8 Ill. Reg. 14427, effective August 1, 1984; amended at 12 Ill. Reg. 8351, effective June 1, 1988; amended at 16 Ill. Reg. 10430, effective July 1, 1992; amended at 22 Ill. Reg. 1206, effective January 1, 1998; amended at 25 Ill. Reg. 10775, effective September 1, 2001; amended at 27 Ill. Reg. 6214, effective May 1, 2003.

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SUBCHAPTER e

- 2) Each facility shall take reasonable steps to ensure that the grievance procedure is accessible to offenders who are impaired, disabled, or unable to communicate in the English language.
- d) Offenders shall be informed of the grievance procedure at the admitting facility and may request further information regarding the procedure from their counselors.
 - 1) The written procedure shall be available to all offenders.
 - 2) An offender unable to speak or read the English language may request that the procedure be explained in the individual's own language.

(Source: Amended at 27 Ill. Reg. 6214, effective May 1, 2003)

Section 504.820 Grievance Officer

- a) The Chief Administrative Officer shall appoint 2 or more employees who may serve as a Grievance Officer to attempt to resolve problems, complaints, and grievances that offenders have been unable to resolve through routine channels.
- b) No person who is directly involved in the subject matter of the grievance or who was a member of the Adjustment Committee that heard a disciplinary report concerning the grievance may serve as the Grievance Officer reviewing that particular case.

(Source: Amended at 27 Ill. Reg. 6214, effective May 1, 2003)

Section 504.830 Grievance Procedures

- a) A Grievance Officer shall review grievances at least weekly, provided that one or more grievances have been filed. Grievances on issues that are deemed without merit may be returned as denied to the sender without further investigation. No merit grievances include grievances that:
 - 1) Have previously been addressed for which there is no additional information; or
 - 2) Are on issues that do not involve or affect the offender.
- b) The Grievance Officer shall promptly submit a copy of any grievance alleging discrimination based on disability or a request for an accommodation based upon disability to the facility ADA Coordinator. The facility ADA Coordinator shall conduct such investigation as deemed appropriate and make written

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SUBCHAPTER c

recommendations to the Chief Administrative Officer for resolution of the grievance.

- c) An offender may be afforded an opportunity to appear before the Grievance Officer unless the grievance is deemed without merit. The Officer may call witnesses as deemed appropriate.
- d) The Grievance Officer shall consider the grievance and report his or her findings and recommendations in writing to the Chief Administrative Officer. The Chief Administrative Officer shall advise the offender of the decision in writing within 2 months after receipt of the written grievance, where reasonably feasible under the circumstances. Responses to duplicate grievances on issues that are currently being grieved may be combined in one response.

(Source: Amended at 27 Ill. Reg. 6214, effective May 1, 2003)

Section 504.840 Emergency Procedures

An offender may request a grievance be handled on an emergency basis by forwarding the grievance directly to the Chief Administrative Officer.

- a) If the Chief Administrative Officer determines that there is a substantial risk of imminent personal injury or other serious or irreparable harm to the offender, the grievance shall be handled on an emergency basis.
- b) The Chief Administrative Officer shall expedite processing of the grievance and respond to the offender, indicating what action shall be or has been taken.

(Source: Amended at 27 Ill. Reg. 6214, effective May 1, 2003)

Section 504.850 Appeals

- a) If, after receiving the response of the Chief Administrative Officer, the offender still feels that the problem, complaint or grievance has not been resolved to his or her satisfaction, he or she may appeal in writing to the Director within 30 days after the date of the decision. Copies of the Grievance Officer's report and the Chief Administrative Officer's decision should be attached.
- b) The Director shall review the grievance and the responses of the Grievance Officer and Chief Administrative Officer and shall determine whether the grievance requires a hearing before the Administrative Review Board. If it is determined that the grievance is without merit or can be resolved without a hearing, the offender shall be advised of this disposition, in writing.

This Handbook has been prepared for you to serve as a guideline to the rules and regulations, organization, programs and services of the facility. It is not a substitute for Department Rules and/or Warden's Bulletins. Specific Department Rules and Warden's Bulletins that are referred to in the Handbook are either included in the appendix or are available in the Law Library.

I. INTRODUCTION

A. Chapter 730 - Illinois Compiled Statutes - Code of Corrections

Stateville Correctional Center is a maximum-security correctional institution with a minimum-security unit outside the walls. It is located at the intersection of Route 53 and Division Street approximately three miles north of Joliet. The mailing address for offenders is P.O. Box 112, Joliet, Illinois, 60434. The purpose of Stateville as prescribed in Chapter 730 of the Illinois Revised Statutes is, in part: "To develop and maintain programs of control, rehabilitation, and employment of committed persons..."

B. Mission Statement

Stateville Correctional Center's mission is to encourage and promote a climate of safe and secure conditions in which offenders and staff can develop positive attitudes and encourage work/program opportunities and experiences that guide offenders toward reintegration into the community.

C. Offender Rights

An offender at Stateville has the right to be treated with respect, impartiality and as a human being. It is an offender's responsibility to treat others, both employees and offenders, in the same manner. An offender may write the warden, assistant wardens, majors, shift commanders, counselors, chaplains and other staff at any time.

An offender has the right to the following:

1. information on the rules and procedures concerning schedules and the operation of the institution;
2. equal access to programs and work assignments (as appropriate to institutional status);
3. involvement in decisions concerning classification status;
4. freedom from discrimination based on race, religion, national origin, sex, handicap, or political beliefs;
5. a healthful, clean and orderly place in which to live;
6. freedom of religious affiliation and worship;
7. health care and dental treatment;
8. wholesome and nutritional meals;
9. proper bedding and clothing;
10. laundry services;
11. bathing facilities;
12. recreation and exercise (in accordance with institutional safety and security concerns);

13. toiletries;
14. access to legal counsel;
15. access to legal services; and
16. use of one's name when addressed, rather than prison number.

D. Orientation

Upon admission into the Illinois Department of Corrections, each offender is placed in Phase 1 Orientation Status until moved to a Level Three or above facility or until 60 days have elapsed since entry. Stateville Correctional Center is a Level One facility. An offender who transfers into this facility from a Reception & Classification Center shall be in Phase 2 Orientation Status through his 60th day after admission into the department. Limitations associated with Phase 2 status shall be communicated to affected offenders by Orientation Unit counseling staff persons.

An offender normally goes through an institutional orientation process during his first seventy-two hours at Stateville. During this period he is also screened by Health Care Unit staff persons in order to address any immediate medical needs he might have. He will be given a Visitor's List and a Personal Identification Number (PIN) Access List form to complete. An offender will receive authorized personal property items as soon as possible after his arrival. General population and protective custody offenders will be issued a personal property storage box and, if requested, a correspondence box.

Each offender will be required to sign a receipt for this handbook. It is to an offender's advantage to carefully review all included information, as he will be held responsible for being aware of, and in compliance with, all included rules and regulations.

E. Classification & Institutional Placement

Each offender will have a personal interview with a counselor to determine appropriate housing placement within the institution. Some factors taken into consideration when determining placement are criminal history, prior institutional adjustment, gang affiliation, health and special needs. An offender who feels that he would have difficulties if placed in the general population of the institution should be aware that placement in Protective Custody is available to all offenders. This option should be discussed with the counselor during the interview.

Offenders interested in requesting a non-smoking cell assignment should contact their counselor or write to the Placement/Assignment Officer who will review the request for approval or denial. Offenders will be advised if their request is denied. Offenders with such approval will not be permitted to smoke or possess smoking material in designated non-smoking cells or rooms or purchase smoking material from the commissary.

II. ORGANIZATION

A. Table of Organization